commerce.wi.gov

Credential Application

Remit to: **State of Wisconsin Department of Commerce-Credentialing** P.O. Box 78780 Milwaukee WI 53293-0780

Phone (608) 261-8467

TDD #: (608) 264-8777 7:45 a.m. - 4:30 p.m. E-mail: madisoncred@commerce.state.wi.us

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU:

- Sign and date this form;
- Submit a complete application with all blanks filled in or marked non-applicable;
- Attach the specified fee; and
- Attach documents if specified on this application.

Instructions: Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. Be certain to sign and date the application. The applicant's social security number is mandatory information. Make a photocopy of the completed application for your records.

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats. But they may not be disclosed to anyone except other State of Wisconsin governmental agencies.

Applicant Information	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, E-mail Address:	
Applicant's Signature	Date (mo/day/yr)

Send application and payment to: State of Wisconsin, Department of Commerce-Credentialing, P.O. Box 78780, Milwaukee, WI

Overnight mail delivery and Office location: State of Wisconsin, Department of Commerce-Credentialing 201 W. Washington Ave., Madison, WI 53703

All other correspondence: Wisconsin Department of Commerce, Safety & Buildings Div., P.O. Box 7082, Madison, WI 53707

MASTER PLUMBER- RESTRICTED APPLIANCE LICENSE-cost code 7630

Reason for <u>Credential</u>: Except as provided under s. 145.06 (4) Stats., and pursuant to s. 145.06, Stats., no person may install plumbing unless the person holds a credential issued by the department as a licensed master plumber, licensed master plumberrestricted, licensed journeyman plumber, licensed journeyman plumber-restricted, registered plumbing apprentice, registered plumbing learner-restricted, registered utility contractor or registered pipe layer.



Requirements of Credential: Pursuant to s. 145.14, Stats., the plumbing activities that may be undertaken by a person who holds a credential as a licensed master plumber-restricted appliance, licensed journeyman plumber-restricted appliance, or registered plumbing learner-restricted appliance shall be limited to the installation and modification of water heaters, water softeners, water treatment devices and other items in connection with an existing water supply system which do not require direct connection to the drain system. A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.

A person who, as a licensed master plumber-restricted appliance, is responsible for an installation or modification of plumbing shall utilize the appropriate credentialed persons to install or modify plumbing. A business engaged in the installation of plumbing that utilizes plumbing learners shall maintain a ratio of at least one journeyman plumber or journeyman plumber-restricted for each plumbing learner. For this purpose, a master plumber or master plumber-restricted may act as a journeyman plumber or journeyman plumber-restricted, respectively.

For any construction or installation that requires a uniform building permit under s. Comm 20.08, persons, entities, or businesses which hold licenses, certifications, or registrations as identified in Comm 5 may not commence construction or installation until a permit is issued.

Education Hours Required to Renew: The renewal of a license as a master plumber-restricted appliance shall be contingent upon the master plumber-restricted appliance obtaining at least 12 hours of acceptable continuing education three months prior to the expiration date of their credential. A person who holds a license as a master plumber-restricted appliance may apply to the department for waiver of the continuing education requirements on the grounds of prolonged illness or disability or similar circumstances. Each application for waiver shall be considered individually on its merits by the department.

The Construction Codes Report may contain advertisements for courses, lectures or seminars which will count towards continuing education for a master plumber-restricted appliance license.

APPLYING FOR MASTER PLUMBER-RESTRICTED APPLIANCE LICENSE

A person may obtain a credential as a licensed master plumber-restricted appliance by one of the following methods:

- Method 1 Completing the necessary hours of experience and taking and passing the master plumber-restricted appliance license examination.
- Method 2 Submitting evidence that the person possesses a master plumber-restricted appliance license-retiree.
- Method 3 A person who held a master plumber-restricted appliance license but exchanged it for a journeyman plumber-restricted appliance license may, upon application to the department, exchange his or her journeyman plumber-restricted appliance license, for a master plumber-restricted appliance license. If the exchange is made at the time of renewal a credential fee of \$500 for the master plumber-restricted appliance license shall be submitted.

Apply for the credential by following the instructions for Method 1, Method 2 or Method 3.

Special Processing Note: If you hold a current license from another state, or under the ordinances of any city, town or village, you must first complete a petition for variance in accord with Comm 5.90 (4)(c) and (d), Wisconsin Administrative Code. Upon successful completion of the variance process, complete the examination application as specified in Method 1 and provide a copy of the petition approval correspondence.

A petition application and information on the petition process may be obtained by contacting the Safety and Buildings Plan Entry Unit at 608/261-8491. The Application for Credentialing Petition for Variance (form SBD-9890COMM5) can also be found on our Website at http://www.commerce.state.wi.us/SB/SB-DivForms.html

METHOD 1 - Experience and Examination

Application and Exam Fee (nonrefundable): \$50.00 class code 7630

Make checks payable to: Department of Commerce. The fee consists of a \$20 application fee and an exam fee of \$30. When the exam is passed, the applicant will be asked to pay a \$500 credential fee which will be prorated because the credential expires on a specific date. The credential, which will be issued after the exam is passed and the prorated credential fee paid, will be effective for 4 years from March 31st. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

Qualifications for Examination: A person applying for a master plumber-restricted appliance license examination shall have at least 1,000 hours of experience per year for at least 2 consecutive years as a licensed journeyman plumber-restricted appliance.

If the experience you gained spanned more than 12 consecutive months use a separate row for each 12-month period. The Time Period must be consecutive years from one row to the next. In the Time Period column fill in the beginning month and year and the ending month and year in which the experience hours were completed. In the Experience Hours column fill in the number of hours claimed for that time period but do not record more than 1000 hours in the column even if you worked more than 1000 hours. If the hours were witnessed by more than one person, the hours witnessed by each person must be filled in on separate rows. Photocopies of this page may be made if you need additional room or would like to mail to witnesses to sign. The witness must have observed or had knowledge of the number for work hours performed in plumbing. If the person signing is not the master plumber or master plumber-restricted appliance who supervised your work, attach a letter explaining why and have the master who is in charge on the premises sign below.

Time	Period					
Began	Ended	Experience	Hours Witnessed by	Signature of Witness	Wisconsin State	Telephone Number
Month/Yr	Month/Yr	Hours	(please print or type)		License Number	of Witness

In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover Chapter 145, Wisconsin Statutes; and chapters Comm 5 and Comm 82-87, Wisconsin Administrative Code; NFPA 13D-2002. The exam is open code book, component manuals, NFPA, and statutes.

Copies of current Wisconsin Administrative Code and Chapter 145 may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253. The NFPA standards 13 (2002 edition) of the National Fire Protection Association may be ordered from the National Fire Protection Association @ (800) 344-3555.

Additional training materials relating to this credential are available and may also be ordered through Document Sales @ (608) 266-3358 or @ (800) 362-7253. They are intended to be training guides and may not match the current code.

SBD-8536-P	Cross Connection Control Manual
SBD-8036-P	Sizing the Water Supply System
SBD-9138-P	Wisconsin Water Treatment Handbook
SBD-10810-P	Multipurpose Piping Systems Design Manual

To schedule an exam:

- In the table below circle the month you would like to take the exam and the city in which you would like to take the exam. Record a telephone number where you can be reached during the day in case the exam center is filled for that date.
- Submit the **FEE AND THIS APPLICATION** with the month and city circled for the exam to the division **at least 30 days** in **advance of the exam date chosen.** Note you may wish to keep a copy of this letter for your records.

Exam Name: MASTER PLUMBER-	This is a 3-hour exam. PLEASE CHOOSE ONE BELOW:				
RESTRICTED APPLIANCE	[] AM Starting at 7:15 [] PM Starting at 11:45				
Circle the exam location of your choice below.					
Then below the location, circle the day you would prefer to take the exam.					
,					

2008 Exam Schedule						
EAU CLAIRE	GREEN BAY	MADISON	<i>PEWAUKEE</i>			
Ramada Convention	Hotel Sierra	Quality Inn & Suites	Waukesha County Technical			
Center	333 Main St	2969 Cahill Main	College			
205 S. Barstow St.	920-432-4555	608-274-7200	WCTC			
715-835-6121			800 Main St			
			262-695-3474			
January 23			January 9			
February 20	February 5	February 12				

March 19			March 6
April 8	April 22		April 17
May 13			May 20
June 10	June 4		June 18
July 16			July 10
August 20	August 13	August 6	
September 17			September 10
October 15	October 9		October 22
November 19			November 11
		December 3	

Daytime Phone Number:

A letter confirming the exact date, time and location will be sent to you.

The Department of Commerce is partnering with OSER to offer exams on the second Saturday of each month in 14 different cities throughout the State. Exam administration will be done by the Office of State Employment Relations (OSER) and follow the same rules as the Safety and Buildings administered tests.

To schedule an OSER exam:

- In the table below circle the month you would like to take the exam and the city where you would like to take the exam. Record your daytime telephone in case the exam center is filled for that date.
- Submit the **FEE AND THIS APPLICATION** with the month and date circled for the exam to the division **at least 30 days in advance of the exam date chosen**. Note you may wish to keep a copy of this letter for your records.

After your application has been processed, you will receive a letter from Safety and Buildings confirming the date and city of your exam. You will also receive an additional confirmation letter from OSER approximately one week before the exam. This letter will confirm the date, time, specific building and room location as well as, exam type, and length of your exam. If special accommodations are requested, please contact Safety and Buildings at (608) 261-8467 prior to submitting your application. Please contact OSER with any questions after receiving the final confirmation letter, by phone at (608) 267-1013 or by email at wicertexams@wisconsin.gov.

Exam Name: MASTER PLUMBER- RESTRICTED APPLIANCE This is a 3-hour exam and will be scheduled for the a.m.						e a.m.
Circle the ex	cam location o	of your choice	below.			
Then below th	he location, circ	cle the month y	ou would prefe	r to take the ex	am.	
	200	8 OSER Exam Sc	hedule			
Ashland	Eau Claire	Fond Du Lac	Green Bay	Kenosha	La Crosse	Madison
July 12	July 12	July 12	July 12	July 12	July 12	July 12
August 9	August 9	August 9	August 9	August 9	August 9	August 9
September 13	September 13	September 13	September 13	September 13	September 13	September 13
October 11	October 11	October 11	October 11	October 11	October 11	October 11
November 8	November 8	November 8	November 8	November 8	November 8	November 8
December 13	December 13	December 13	December 13	December 13	December 13	December 13
	200	8 OSER Exam Sc	hedule			
Milwaukee	Platteville	Rhinelander	Rice Lake	Superior	Wausau	WI Rapids
July 12	July 12	July 12	July 12	July 12	July 12	July 12
August 9	August 9	August 9	August 9	August 9	August 9	August 9
September 13	September 13	September 13	September 13	September 13	September 13	September 13
October 11	October 11	October 11	October 11	October 11	October 11	October 11
November 8	November 8	November 8	November 8	November 8	November 8	November 8
December 13	December 13	December 13	December 13	December 13	December 13	December 13

Home Phone:	

METHOD 2 - Possession of a Master Plumber-Restricted Appliance License-Retiree

The fee for applying for the credential using method 2 is as specified in the following table:

Month Application	Fee	Month Application	Fee	Month Application	Fee
is mailed		is mailed		is mailed	
January	\$426.25	May	\$509.58	September	\$467.92
February	\$415.83	June	\$499.17	October	\$457.50
March	\$405.42	July	\$488.75	November	\$447.08
April	\$520.00	August	\$478.33	December	\$436.67

Record the amount of the fee you will be sending in the box below:

Make checks payable to: Department of Commerce. The fee consists of a \$20 application fee and a prorated \$500 credential fee. The credential will be effective for 4 years from March 31st. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

ATTACH the original of your master plumber-restricted appliance license-retiree.

Note: Retiree licenses have been discontinued and once turned in will not be reissued.

METHOD 3 - Possession of a Journeyman Plumber-Restricted Appliance License which had been Exchanged for a Master Plumber-Restricted Appliance License

The fee for applying for the credential using method 3 is as specified in the following table:

Month Application is mailed	Fee	Month Application is mailed	Fee	Month Application is mailed	Fee
January	\$406.25	May	\$489.58	September	\$447.92
February	\$395.83	June	\$479.17	October	\$437.50
March	\$385.42	July	\$468.75	November	\$427.08
April	\$500.00	August	\$458.33	December	\$416.67

Record the amount of the fee you will be sending in the box below:

Fee Submitted (nonrefundable):	\$	class code 7630
--------------------------------	----	-----------------

Make checks payable to: Department of Commerce. The fee consists of a prorated \$500 credential fee. The credential will be effective for 4 years from March 31st. Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

ATTACH the original of your old master plumber-restricted appliance license. You must have completed the necessary hours of continuing education.